

THE PATENT OFFICE IS HEREBY REQUESTED TO ACKNOWLEDGE RECEIPT
OF THE FOLLOWING DOCUMENTS BY DATE STAMPING AND RETURNING
THIS POST CARD

Serial No: 08/182,183

Applicants: Lin, et al.

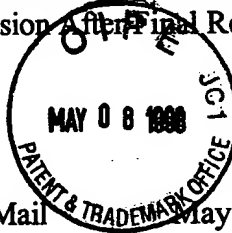
Filed: May 23, 1994 Examiner: M. Allen Group Art Unit: 1645

Title: Glial Cell Line-Derived Neurotrophic Factor

1 pg Fee Authorization/Amendment Transmittal Letter + 1 copy
17 pgs Transitional Provisions Submission After Final Rejection

S-225E
DRC/khh

Via First Class Mail May 5, 1998



Amgen Inc.
1840 DeHavilland Drive
Thousand Oaks, CA 91320-1789

AMGEN

Box AF
Assistant Commissioner for Patents
Washington DC 20231

PATENT APPLICATION

FEE AUTHORIZATION / AMENDMENT TRANSMITTAL LETTER

Attorney's Docket No: SYNE-225E
(SYNE225/C4-US)

| | | | |
|--------------------------|-----------------------------|-------------------------------|------------------------|
| Serial No. 08/182,183 | Filing Date May 23, 1994 | Examiner Marianne P. Allen | Group Art Unit 1645 |
|--------------------------|-----------------------------|-------------------------------|------------------------|

In Re Application of
Lin, et al.For
Glial Cell Line-Derived Neurotrophic Factor

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

- ☒ Applicant(s) request(s) the following extension of time under 37 C.F.R. 1.136(a):
- ☐ One month of original due date (\$110.00)
 - ☒ Two months of original due date (\$400.00)
 - ☐ Three months of original due date (\$950.00)
 - ☐ Four months of original due date (\$1,510.00)
 - ☐ Five months of original due date (\$2,060.00)
- ☒ A response in connection with the matter for which this extension is requested:
- ☒ is filed herewith.
 - ☐ has been filed.
 - ☒ The response is a filing of a Transitional Provisions Submission After Final Rejection under 37 C.F.R. §1.129(a)
- ☐ The accompanying papers include amended claims for which no additional fee is required.
- ☒ The accompanying papers include amended claims the fee for which has been calculated as follows:

CLAIMS AS AMENDED

| (1) | (2) Claims remaining after amendment | (3) | (4) Highest number previously paid for | (5) No. of extra claims present | (6) Rate | (7) Additional Fee |
|---|--|-------|--|---------------------------------------|-------------|--------------------------|
| Total Claims | *140 | Minus | 122 = | 18 | x \$22 | = 396.00 |
| Indep. Claims | 19 | Minus | 15 = | 4 | x \$82 | = 328.00 |
| <input type="checkbox"/> First Appearance of a multiple dependent claim | | | | | +\$270 | = |
| Total Additional Fee for this Amendment | | | | | 724.00 | |

*If the entry in column 2 is less than the entry in column 4, write "0" in column 5.

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

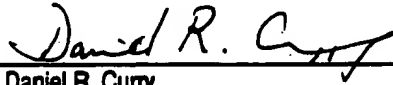
- ☒ The following other fees are incurred by the accompanying papers.
- ☒ Other: \$790.00-Transitional Provisions Submission After Final Rejection under 37 C.F.R. §1.129(a)

Please charge Deposit Account No. 01-0519 in the name of Amgen Inc. in the amount of \$ 1,914.00. A duplicate copy of this petition is attached.

- ☒ If an additional extension of time is required, please consider this a request therefore.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required by the accompanying papers, or credit any overpayment to Deposit Account No. 01-0519.

Please Send Future Correspondence To:

U.S. Patent Operations/DRC
Dept. 430, M/S 27-4-A
AMGEN INC.
One Amgen Center Drive
Thousand Oaks, California 91320-1789


Daniel R. Curry
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Date: May 5, 1998

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231, on the date appearing below.

5/5/98
Date

7 Curry
Signature